

PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

First Inventor or Application Identifier Hirofumi KAWAI

Title SEMICONDUCTOR DEVICE AND METHOD FOR MANUFACTURING A  
SEMICONDUCTOR DEVICE

Assignee Name: Kabushiki Kaisha Toshiba

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10/638401

08/12/03

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Commissioner for Patents  
Mail Stop Patent Application  
Alexandria, Virginia 22313

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Specification Total Sheets
3. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets
4. ☐ Oath or Declaration Total Pages
- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. §1.63(d))  
(for continuation/divisional with box 17 completed)
- i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in  
the prior application, see 37 C.F.R. §1.63(d)(2) and  
1.33(b).
5. ☐ CD-ROM or CD-R in duplicate, large table or Computer  
Program (Appendix)
6. ☐ Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification or Sequence Listing on :  
i. ☐ CD-ROM or CD-R (2 copies); or  
ii. ☐ Paper
- c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☒ Application Data Sheet. See 37 CFR 1.76
9. ☐ 37 C.F.R. §3.73(b) Statement ☐ Power of  
(when there is an assignee) Attorney
10. ☐ English Translation Document (if applicable)
11. ☒ Information Disclosure ☒ Copies of IDS  
Statement (IDS)/PTO-1449 Citations (3)
12. ☐ Preliminary Amendment
13. ☒ White Advance Serial No. Postcard
14. ☒ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
15. ☐ Applicant claims small entity status.  
See 37 CFR 1.27
16. ☒ Other: Request for Priority

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.:  
Prior application information: Examiner: Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. Amend the specification by inserting before the first line the sentence:

- ☐ This application is a ☐ Continuation ☐ Division ☐ Continuation-in-part (CIP)  
of application Serial No. Filed on
- ☐ This application claims priority of provisional application Serial No. Filed

## 19. CORRESPONDENCE ADDRESS



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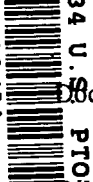
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Signature:		Date:	8/12/03
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Registration Number 21,124

8/12/03



Socket No. 241422US2

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

INVENTOR(S) Hirofumi KAWAI

SERIAL NO: New Application

FILING DATE: Herewith

FOR: SEMICONDUCTOR DEVICE AND METHOD FOR MANUFACTURING A SEMICONDUCTOR DEVICE

**FEE TRANSMITTAL**

 COMMISSIONER FOR PATENTS  
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	19 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	2 - 3 =	0	x \$84 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
BASIC FEE				\$750.00
TOTAL OF ABOVE CALCULATIONS				\$880.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
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☐ Please charge Deposit Account No. 15-0030 in the amount of \$0.00 A duplicate copy of this sheet is enclosed.

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☒ The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment form is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

 OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.

Date:

8/12/03

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